

## **INFORMATIONAL LETTER NO. 2068-MC-FFS-D**

**DATE:** November 27, 2019

TO: All Iowa Medicaid Providers

**APPLIES TO:** Managed Care (MC) and Fee-for-Service (FFS), and Dental

(D)

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid

Enterprise (IME)

**RE:** Exclusion from Participation in Federal Health Care Programs

**EFFECTIVE:** Upon Receipt

\*\*\*\*This Informational Letter replaces IL 2056-MC-FFS-D\*\*\*\*

(An incorrect web link was listed in the previous IL. This IL also includes additional information about the Iowa Medicaid Provider Sanctions list.)

There are federal rules and enforcement provisions related to providers who are excluded from participation in the Medicaid program. These rules and the penalties are associated with either being or employing excluded individuals as described in the Department of Health and Human Services Office of Inspector General (HHS-OIG) document: Special Advisory Bulletin: The Effect of Exclusion From Participation in Federal Health Care Programs. This document was issued on May 8, 2013, and is available on the DHS website<sup>1</sup>.

The penalty of non-compliance is described in the HHS-OIG Bulletin. This memorandum serves as an annual reminder to all Iowa Medicaid providers of these rules and that all Medicaid providers must be in full compliance.

Providers and contracting entities are required to check the program exclusion status of individuals and entities prior to entering into employment or contractual relationships. Search the HHS-OIG website<sup>2</sup> to determine whether an individual or entity is excluded. An excluded individual, or an entity employing or contracting with an excluded individual, that submits a claim for reimbursement to a federal health care program, or causes such a claim to be submitted, may be subject to civil money penalties and other damages for each item or service furnished during the period that the person or entity was excluded (section 1128A(a)(1)(D) of the Social Security Act).

<sup>&</sup>lt;sup>1</sup> https://dhs.iowa.gov/sites/default/files/Effects%20of%20Exclusion.pdf?110420192211

<sup>&</sup>lt;sup>2</sup> http://exclusions.oig.hhs.gov/

Providers should search the HHS-OIG website monthly to capture exclusions and reinstatements that have occurred since the last search. Claims paid by the Medicaid program for services rendered by an excluded individual or entity could be subject to repayment. Providers can search the HHS-OIG website by the name of any individual or entity.

An additional listing of individual or entities excluded from participation as an Iowa Medicaid provider can be found on the DHS <a href="website">website</a>3. Iowa Code section 249.49 (2013 Acts, ch 24 § 13) directs the Iowa Medicaid Program Integrity Unit to maintain an up-to-date list of providers that are found to be in violation of the Iowa Medicaid Program. This list identifies: all providers that the Iowa Medicaid Program Integrity Unit has terminated, suspended, or placed on probation after administrative appeals have been exhausted; all providers that have failed to return an identified overpayment of medical assistance within the time frame specified in Iowa Code section 249A.39; and all providers found liable for a false claims law violation related to the medical assistance program under Iowa Code chapter 685.

It is strongly recommended that when executing these searches, providers only enter the last name and (at most) first letter of the first name (no middle initial) so that all possible exclusion candidates will be returned for review.

Providers must gather and check all current and former names of their employees when searching the HHS-OIG and the Iowa Medicaid Sanctions list.

In order to enroll, and as a condition of re-enrollment in the lowa Medicaid program, providers must accept the lowa Medicaid Provider Agreement (470-2965<sup>4</sup>), which includes a requirement to report any exclusion information to lowa Medicaid within thirty five (35) days of knowledge of any findings. Section 4. Records 4.1 and 4.2, providers shall maintain records for a period of at least five (5) years.

The IME appreciates your partnership as we work together to serve the needs of the Iowa Medicaid members and protect the integrity of the Iowa Medicaid program. If you have any questions, please contact the IME Provider Services Unit at 1-800-338-7909, locally in Des Moines at 515-256-4609 or by e-mail at imeproviderservices@dhs.state.ia.us.

<sup>&</sup>lt;sup>3</sup> https://dhs.iowa.gov/ime/providers/program-integrity

<sup>&</sup>lt;sup>4</sup> https://dhs.iowa.gov/sites/default/files/470-2965.pdf?101820191952